

PROOF OF CLAIM AND RELEASE FORM

Deadline for Submission: _____, 202_

IF YOU (1) HELD SHARES OF THE VANGUARD INVESTOR TARGET RETIREMENT FUNDS (“INVESTOR TRFS”) IN TAXABLE ACCOUNTS, OR IN TAX-ADVANTAGED ACCOUNTS WHERE CAPITAL GAINS FROM THE INVESTOR TRFS IN 2021 WERE DISTRIBUTED OUTSIDE OF THE TAX-ADVANTAGED ACCOUNTS (“OTHER RELEVANT ACCOUNTS”); (2) RECEIVED CAPITAL GAINS DISTRIBUTIONS FROM THE VANGUARD TRFS IN 2021; (3) AND RESIDE IN THE UNITED STATES; YOU ARE A “SETTLEMENT CLASS MEMBER” AND YOU MAY BE ENTITLED TO SHARE IN THE SETTLEMENT PROCEEDS. (EXCLUDED FROM THE SETTLEMENT CLASS ARE: (I) DEFENDANTS, THE PRESENT AND FORMER OFFICERS AND DIRECTORS OF DEFENDANTS AT ALL RELEVANT TIMES, MEMBERS OF THEIR IMMEDIATE FAMILIES, AND ANY ENTITY IN WHICH ANY DEFENDANT, OR ANY PERSON EXCLUDED UNDER THIS SUBSECTION (I), HAS OR HAD A MAJORITY OWNERSHIP INTEREST AT ANY TIME; (II) PERSONS WHOSE CLAIMS IN THIS MATTER HAVE BEEN FINALLY ADJUDICATED ON THE MERITS OR OTHERWISE RELEASED; (III) COUNSEL OF RECORD FOR THE PARTIES IN THIS ACTION; (IV) ANY JUDGE OR MAGISTRATE PRESIDING OVER THIS ACTION; (V) PERSONS WHO PROPERLY EXECUTE AND SUBMIT A TIMELY REQUEST FOR EXCLUSION FROM THE SETTLEMENT CLASS; AND (VI) THE LEGAL REPRESENTATIVES, SUCCESSORS, AND ASSIGNEES OF ANY SUCH EXCLUDED PERSONS).

YOU MAY HAVE PREVIOUSLY RECEIVED NOTICE OF A PRIOR \$40 MILLION SETTLEMENT IN THIS ACTION (“PRIOR SETTLEMENT”). **IF YOU SUBMITTED A CLAIM FOR THE PRIOR SETTLEMENT, DO NOT SUBMIT A NEW CLAIM. YOU CAN CALL THE CLAIMS ADMINISTRATOR IF YOU ARE UNSURE.** YOUR PRIOR CLAIM WILL BE CONSIDERED TIMELY SUBMITTED FOR THIS SETTLEMENT UNLESS YOU WITHDRAW IT.

IF YOU ARE A SETTLEMENT CLASS MEMBER AND HAVE NOT PREVIOUSLY SUBMITTED A CLAIM, IN ORDER TO SHARE IN THE DISTRIBUTION OF THE NET SETTLEMENT FUND, **YOU MUST COMPLETE AND SUBMIT THE ELECTRONIC VERSION OF THIS PROOF OF CLAIM AND RELEASE FORM (“PROOF OF CLAIM”) BY 11:59 P.M. EST ON _____, 202_ AT THE CLAIMS ADMINISTRATOR’S WEBSITE, WWW.STRATEGICCLAIMS.NET/VANGUARD.**

IF YOU DO NOT COMPLETE AND SUBMIT AN ELECTRONIC VERSION OF THIS PROOF OF CLAIM, YOU MUST COMPLETE AND SIGN THIS PROOF OF CLAIM AND MAIL IT BY FIRST CLASS MAIL, POSTMARKED NO LATER THAN _____, 202_ TO STRATEGIC CLAIMS SERVICES, THE CLAIMS ADMINISTRATOR, AT THE FOLLOWING ADDRESS:

Vanguard Chester Funds Litigation
c/o Strategic Claims Services
600 N. Jackson St., Ste. 205
P.O. Box 230
Media, PA 19063
Tel.: 866-274-4004
Fax: 610-565-7985
info@strategicclaims.net

YOUR FAILURE TO SUBMIT YOUR CLAIM BY _____, 202_, WILL SUBJECT YOUR CLAIM TO REJECTION AND PRECLUDE YOU FROM RECEIVING ANY MONEY IN CONNECTION WITH THE SETTLEMENT OF THIS ACTION. IF YOU ARE A SETTLEMENT CLASS MEMBER AND DO NOT SUBMIT A PROPER PROOF OF CLAIM, YOU WILL NOT SHARE IN THE SETTLEMENT BUT YOU NEVERTHELESS WILL BE BOUND BY THE SETTLEMENT (INCLUDING ITS RELEASE OF CLAIMS) AND THE COURT'S FINAL JUDGMENT UNLESS YOU EXCLUDE YOURSELF. SUBMISSION OF A PROOF OF CLAIM DOES NOT GUARANTEE THAT YOU WILL SHARE IN THE PROCEEDS OF THE SETTLEMENT.

CLAIMANT'S STATEMENT

1. I (we) received capital gains distributions in 2021 from Investor TRFs that were held in a Taxable Account or Other Relevant Account (as defined in the Stipulation of Settlement, dated September 5, 2025 ("Stipulation")). (Do not submit this Proof of Claim and Release Form if you did not receive capital gains distributions in 2021 from Investor TRFs that were held in a Taxable Account or Other Relevant Account.)
2. By submitting this Proof of Claim and Release Form ("Proof of Claim"), I (we) state that I (we) believe in good faith that I am (we are) a Settlement Class Member(s) as defined above and in the Notice of Pendency and Proposed Settlement of Class Action (the "Notice"), or am (are) acting for such person(s); that I am (we are) not a Defendant in the Action or anyone excluded from the Settlement Class; that I (we) have read and understand the Notice; that I (we) believe that I am (we are) entitled to receive a share of the Net Settlement Fund, as defined in the Notice; that I (we) elect to participate in the proposed Settlement described in the Notice; and that I (we) have not filed a request for exclusion. (If you are acting in a representative capacity on behalf of a Settlement Class Member [e.g., as an executor, administrator, trustee, or other representative], you must submit evidence of your current authority to act on behalf of that Settlement Class Member. Such evidence would include, for example, letters testamentary, letters of administration, or a copy of the trust documents.)
3. I (we) consent to the jurisdiction of the Court with respect to all questions concerning the validity of this Proof of Claim. I (we) understand and agree that my (our) claim may be subject to investigation and discovery under the Federal Rules of Civil Procedure, provided that such investigation and discovery shall be limited to my (our) status as a Settlement Class Member(s) and the validity and amount of my (our) claim. No discovery shall be allowed on the merits of the Action or Settlement in connection with processing of the Proof of Claim.
4. I (we) have provided my identification number assigned to me by the Claims Administrator, if applicable.
5. I (we) have enclosed photocopies of the Forms 1099, stockbroker's confirmation slips, stockbroker's statements, or other documents evidencing the 2021 capital gains distributions received from Investor TRFs held in Taxable Accounts or Other Relevant Accounts as listed below in support of my (our) claim. (IF ANY SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN A COPY OR EQUIVALENT DOCUMENTS FROM YOUR BROKER OR TAX ADVISOR BECAUSE THESE DOCUMENTS ARE NECESSARY TO PROVE AND PROCESS YOUR CLAIM.)
6. I (we) understand that the information contained in this Proof of Claim is subject to such verification as the Claims Administrator may request or as the Court may direct, and I (we) agree to cooperate in any such verification. (The information requested herein is designed to provide the minimum amount of information necessary to process most simple claims. The Claims Administrator may request additional information as required to calculate your Recognized Claim

efficiently and reliably. In some cases, the Claims Administrator may condition acceptance of the claim based upon the production of additional information.)

7. Upon the occurrence of the Court's approval of the Settlement, as detailed in the Notice, I (we) agree and acknowledge that my (our) signature(s) hereto shall effect and constitute a full and complete release, remise and discharge by me (us) and my (our) heirs, joint tenants, tenants in common, beneficiaries, executors, administrators, predecessors, successors, attorneys, insurers and assigns (or, if I am (we are) submitting this Proof of Claim on behalf of a corporation, a partnership, estate or one or more other persons, by it, him, her or them, and by its, his, her or their heirs, executors, administrators, predecessors, successors, and assigns) of each of the "Released Parties" of all "Released Claims," as those terms are defined in the Stipulation.
8. Upon the occurrence of the Court's approval of the Settlement, as detailed in the Notice, I (we) agree and acknowledge that my (our) signature(s) hereto shall effect and constitute a covenant by me (us) and my (our) heirs, joint tenants, tenants in common, beneficiaries, executors, administrators, predecessors, successors, attorneys, insurers and assigns (or, if I am (we are) submitting this Proof of Claim on behalf of a corporation, a partnership, estate or one or more other persons, by it, him, her or them, and by its, his, her or their heirs, executors, administrators, predecessors, successors, and assigns) to permanently refrain from prosecuting or attempting to prosecute any Released Claims, including Unknown Claims, against any of the Released Parties.
9. I acknowledge that "Released Parties" has the meaning laid out in the Stipulation.
10. I acknowledge that "Released Claims" has the meaning laid out in the Stipulation.
11. I acknowledge that "Unknown Claims" has the meaning laid out in the Stipulation.
12. I (We) acknowledge that the inclusion of "Unknown Claims" in the definition of claims released pursuant to the Stipulation was separately bargained for and is a material element of the Settlement of which this release is a part.
13. NOTICE REGARDING INSTITUTIONAL FILERS: Representatives with the authority to file on behalf of accounts of multiple Persons ("Representative Filers") must submit information regarding their clients' distributions in the approved electronic spreadsheet format, which is available by request to the Claims Administrator at efile@strategicclaims.net or by visiting the website www.strategicclaims.net/institutional-filers/. One spreadsheet may contain the information for multiple Persons and institutional accounts who constitute distinct legal entities ("Legal Entities"), but all Representative Filers MUST also submit a manually signed Proof of Claim and Release Form, as well as proof of authority to file (see Item 2 of the Claimant's Statement) along with the electronic spreadsheet. The 2021 capital gains distributions should be reported in the electronic file so that each resulting Claim corresponds to a single Legal Entity, regardless of the number of individually managed accounts the Legal Entity has, as only one Claim will be processed per Legal Entity (e.g. a Representative Filer reporting the transactions for a fund with multiple sub-accounts should report one total amount of 2021 capital gains distributions for each Investor TRF held in Taxable Accounts or Other Relevant Accounts across their sub-accounts; this would constitute and be processed as a single Claim). The Claims Administrator reserves the right to combine a Legal Entity's accounts into a single Claim prior to processing in the event that a Legal Entity's accounts are divided across multiple Claims when submitted by a Representative Filer. The Claims Administrator also reserves the right to request additional documentary proof regarding a Legal Entity's 2021 capital gains distributions from Investor TRFs to prove and accurately process the Claim.

14. NOTICE REGARDING ONLINE FILING: Claimants who are not Representative Filers may submit their claims online using the electronic version of the Proof of Claim and Release Form hosted at www.strategicclaims.net/vanguard. If you are not acting as a Representative Filer, you do not need to contact the Claims Administrator prior to filing; you will receive an automated e-mail confirming receipt once your Proof of Claim and Release Form has been submitted. If you are unsure if you should submit your claim as a Representative Filer, please contact the Claims Administrator at info@strategicclaims.net or (866) 274-4004. If you are not a Representative Filer, but your claim contains a large number of transactions, the Claims Administrator may request that you also submit an electronic spreadsheet showing your transactions to accompany your Proof of Claim and Release Form.

I. CLAIMANT INFORMATION

Beneficial Owner Name:		
Address:		
City	State	ZIP
Foreign Province	Foreign Country	
Day Phone	Evening Phone	
Email		
Social Security Number (for individuals):	OR	Taxpayer Identification Number (for estates, trusts, corporations, etc.):
Identification Number Assigned by Claims Administrator (if applicable):		

II. CONFIRMATION OF IDENTIFICATION NUMBER

IF YOU WERE ASSIGNED AN IDENTIFICATION NUMBER BY THE CLAIMS ADMINISTRATOR AND PROVIDED IT ON THE SECTION ABOVE, PLEASE CHECK THE BOX BELOW AND PROCEED TO THE CERTIFICATION IN SECTION IV OF THIS PROOF OF CLAIM. YOU DO NOT NEED TO COMPLETE THE FOLLOWING SECTION III IF YOU PROVIDED YOUR ASSIGNED IDENTIFICATION NUMBER.



I confirm that I have provided the Identification Number assigned by the Claims Administrator where indicated on this Proof of Claim.

III. SCHEDULE OF 2021 CAPITAL GAINS DISTRIBUTIONS

MOST (BUT NOT ALL) SETTLEMENT CLASS MEMBERS WERE ASSIGNED, AND RECEIVED WITH THEIR NOTICE, AN IDENTIFICATION NUMBER FROM THE CLAIMS ADMINISTRATOR. IF YOU RECEIVED AN IDENTIFICATION NUMBER AND YOU PROVIDE THAT NUMBER ABOVE, YOU DO NOT NEED TO COMPLETE THIS SECTION.

IF YOU DID NOT RECEIVE AN IDENTIFICATION NUMBER, PLEASE PROVIDE THE FOLLOWING INFORMATION AND ATTACH THE REQUIRED SUPPORTING DOCUMENTATION:

EXHIBIT A-2

State the total amount of short- and long-term capital gains distributions you received in 2021 from each Investor TRF that you held in Taxable Accounts or Other Relevant Accounts.

- Taxable Accounts are accounts that are not Tax-Advantaged Accounts.
- Tax-Advantaged Accounts are accounts that are tax-exempt or tax-deferred or that offer any other type of tax benefits, including but not limited to traditional or Roth individual retirement accounts and 401(k) plans.
- Other Relevant Accounts are Tax-Advantaged Accounts where capital gains from the Investor TRFs in 2021 were distributed outside of the Tax-Advantaged Accounts.
- All submissions in this section must be accompanied by supporting documentation, such as a Form 1099 showing the relevant 2021 capital gains distributions in your Taxable or Other Relevant Account.

FUND	TOTAL CAPITAL GAINS DISTRIBUTIONS RECEIVED IN 2021	
	Short-Term	Long-Term
Vanguard Target Retirement 2015 Fund (VTXVX)		
Vanguard Target Retirement 2020 Fund (VTWNX)		
Vanguard Target Retirement 2025 Fund (VTTVX)		
Vanguard Target Retirement 2030 Fund (VTHRX)		
Vanguard Target Retirement 2035 Fund (VTTHX)		
Vanguard Target Retirement 2040 Fund (VFORX)		
Vanguard Target Retirement 2045 Fund (VTIVX)		
Vanguard Target Retirement 2050 Fund (VFIFX)		
Vanguard Target Retirement 2055 Fund (VFFVX)		
Vanguard Target Retirement 2060 Fund (VTTSX)		
Vanguard Target Retirement 2065 Fund (VLXVX)		
Vanguard Target Retirement Income Fund (VTINX)		

IV. CERTIFICATION

I (We) submit this Proof of Claim and Release Form under the terms of the Stipulation described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the Eastern District of Pennsylvania with respect to my (our) claim as a Settlement Class Member(s) and for purposes of enforcing the release and covenant not to sue set forth herein. I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that may be entered in this Action. I (We)

have not submitted any other claim covering the same 2021 capital gains distributions and know of no other Person having done so on my (our) behalf.

I (We) certify that I am (we are) NOT subject to backup withholding under the provisions of Section 3406 (a)(1)(c) of the Internal Revenue Code because: (a) I am (We are) exempt from backup withholding; or (b) I (We) have not been notified by the I.R.S. that I am (we are) subject to backup withholding as a result of a failure to report all interest or dividends; or (c) the I.R.S. has notified me (us) that I am (we are) no longer subject to backup withholding.

NOTE: If you have been notified by the I.R.S. that you are subject to backup withholding, please strike out the language that you are not subject to backup withholding in the certification above.

UNDER THE PENALTIES OF PERJURY UNDER THE LAWS OF THE UNITED STATES, I (WE) CERTIFY THAT ALL OF THE INFORMATION I (WE) PROVIDED ON THIS PROOF OF CLAIM AND RELEASE FORM IS TRUE, CORRECT AND COMPLETE.

Signature of Claimant (If this claim is being made
on behalf of Joint Claimants, then each must sign):

(Signature)

(Signature)

(Capacity of person(s) signing, e.g. beneficial
purchaser(s), executor, administrator, trustee, etc.)
☐ Check here if proof of authority to file is enclosed.
(See Item 2 under Claimant's Statement)

Date: _____

THIS PROOF OF CLAIM AND RELEASE FORM MUST BE SUBMITTED ONLINE BY 11:59 P.M. EST ON _____, 202_ AT www.strategicclaims.net/vanguard

A Proof of Claim shall be deemed to have been submitted when actually received by the Claims Administrator. The Claims Administrator will acknowledge receipt of your Proof of Claim by emailing a confirmation. Your claim is not deemed filed until you receive such an acknowledgement.

You should be aware that it will take a significant amount of time to process fully all of the Proof of Claim forms and to administer the Settlement. This work will be completed as promptly as time permits, given the need to investigate and tabulate each Proof of Claim. Please notify the Claims Administrator of any change of address.

REMINDER CHECKLIST

- Please be sure to sign this Proof of Claim on page___. If this Proof of Claim is submitted on behalf of joint claimants, each claimant must sign.
- If you did not receive an Identification Number, please remember to attach supporting documents. Do NOT send any stock certificates. Keep copies of everything you submit.
- If you move or change your address, telephone number or email address, please submit the new information to the Claims Administrator, as well as any other information that will assist us in contacting you. NOTE: Failure to submit updated information to the Claims Administrator may result in the Claims Administrator's inability to contact you regarding issues with your claim or deliver payment to you.